

TRANSMITTAL FORM		Application Number 09/700430
		Filing Date 11/15/2000
(to be used for all correspondence after initial filing)		First Named Inventor David A Kapilow
		Group Art Unit 2644
		Examiner Name
Total Number of Pages in this Submission		Attorney Docket Number 1999-0096B

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Enclosures (check all that apply)

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<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) & Letter to Official Draftsman	<input type="checkbox"/> Appeal Communications to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Preliminary Amendment	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communications to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to the Commissioner	<input type="checkbox"/> Proprietary Information
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<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Return Receipt Postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

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CERTIFICATE OF MAILING

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